

May 2002

To submit information, update, or ask questions, please contact Audrey Smolkin at 215-861-4794 or by e-mail at: asmolkin@hrsa.gov



LATE BREAKING NEWS

Greetings CAPpers,

Hope your projects are going great...some updates!

JUNE CONFERENCE: If you have not already done so, please register NOW for the June conference and make your hotel reservations. Space is very limited. You can register online by going to www.capcommunity.hrsa.gov and clicking on "Click here to register". Please note that registration this year does include a \$150 registration fee. Please also contact the hotel as soon as possible and reserve your room under the CAP conference block. The hotel can be reached at (202) 328-2000.

NO-COST EXTENSION FOR MARCH GRANTEES: The Office of Grants Management anticipates processing another nocost extension for March grantees that will run June 1-August 31, 2002. Grantees do not need to take any action to receive this automatic extension and will be officially notified by the Office of Grants Management. Questions should be directed to your Grants Management analyst as listed on your NGA.

CAPSTONE AND TA CALL SCHEDULE: Due to the conference coming in early June, there is a slightly modified schedule for TA calls and CAPStone. We will be having a TA call on May 14 on FTCA/insurance liability issues and then will pick up calls again on July 9, after a break for June. Similarly, there will be no June CAPStone, and we will resume our regularly scheduled programming with a new issue in July.

CAP WEBSITE PASSWORD: Please note that as of June 15, the CAP website (www.capcommunity.hrsa.gov) will be password-protected. You will not be able to enter the site at all without the password – which is, creatively enough, "CAP".

Thanks, and looking forward to seeing you in June! Audrey

Audrey Smolkin 215-861-4794 asmolkin@hrsa.gov

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Technical Assistance Calls

With the exception of the break in June noted above, technical assistance calls will continue to be held every other Tuesday from 2 to 3 PM EST. The schedule for May appears below.

PLEASE NOTE: There is a new registration system for technical assistance calls. To register, search for summaries or materials from prior calls, and download materials for upcoming calls, please go to the following website: http://www.capcommunity.hrsa.gov; click on the right hand side under the call title (*Click here to register*) and follow the directions from that page. The password for the website is "CAP". Once you register for the call, please be sure to download the materials that will be used during the call. You should immediately receive a confirmation note by email that includes the call-in number for the call. If you have difficulty registering or do not receive the call-in number, please contact scampbell@mac1988.com or call 301-468-6006 ext. 437. We must pay for each line used, so please remember to cancel your registration if you are unable to call in.

CAP TA Calls	
Date	Topic
May 14	Risk Management Issues/FTCA Liability
	Martin Bree, Director, Center for Risk Management, BPHC/HRSA will discuss issues related to FTCA, other forms of coverage, and pitfalls and challenges grantees should be aware of while looking at risk management/liability issues. He may be joined by grantees who have dealt with this issue successfully. Representatives from consulting law firms will join us to contribute to the discussion. Grantees are encouraged to submit their questions on this topic ahead of time by emailing asmolkin@hrsa.gov.
Please Note:	There is only one TA call in May and none in June. Calls will resume on July 9 th and related information will be included in the July issue of CAPStone.

TA calls are summarized and posted on the CAP website (www.capcommunity.hrsa.gov). Legal issue briefs are posted on the site under legal issues and require a password, which may be obtained by emailing asmolkin@hrsa.gov. You may also request an audiotape copy of any previous calls (up to one month after the call) by contacting Shandy Campbell at scampbell@mac1988.com.



GRANT OPPORTUNITIES AND AWARDS

Aetna Foundation Grants

Deadline: June 28, 2002

The Regional Community Grants Program, funded by the Aetna Foundation, is currently accepting proposals for programs in one of three areas: children's health, women's health, and disparities in health. Any non-profit organization with 501(c)(3) status may submit

proposals for one or more programs that fit these criteria. The Regional Community Grants Program is designed to develop strategic partnerships with non-profit organizations that share Aetna's commitment to health issues. For more information, please visit http://www.aetna.com/foundation/communitygrants/rfp.htm.

Gustav O. Lienhard Award Accepting Nominations

The National Academies' Institute of Medicine (IOM) is currently accepting nominations for the 15th Annual Gustav. O. Lienhard Award. This award recognizes individuals for outstanding achievement in improving health care services in the United States. Funded by the Robert Wood Johnson Foundation, the award includes a medal and a monetary prize of \$25,000.

Any group or individual may submit a nomination, and there are no eligibility limits for education or profession of nominated individuals. Award recipients are selected based on two primary criteria: achievement in the area of personal health services and achievement on a national scope.

For more information on guidelines and procedures for making a nomination, please visit the IOM website at http://www.iom.edu/IOM/IOMHome.nsf/Pages/l

RWJ Offering Funds for Research in Health Care Policy and Financing

Deadline: Ongoing

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The Changes in Health Care Financing Organization program, a Robert Wood Johnson Foundation initiative, is accepting proposals for research grants related to health care policy and financing. The proposal request covers policy analysis, research, evaluation, and demonstration projects that provide timely, useful information on health care policy and financing issues for publication as well as to inform individual decision makers.

Up to \$13.5 million has been made available under two grant categories: small grants of up to \$100,000 for projects to be completed within 12 months, and larger grants of more than \$100,000 for projects requiring more than 12 months to complete.

Eligible projects must emphasize the ways in which current public and private mechanisms for financing health care, or proposed major changes in those mechanisms, will affect health care costs, access, or quality. For more information, visit http://www.hcfo.net, send an email to hcfo@ahsrhp.org, or call 202-292-6700.

HHS Approves Demonstration Projects in Two States

HHS Secretary Tommy G. Thompson recently announced the approval of innovative demonstration projects in Minnesota and Georgia designed to make prescription drugs less costly and more readily available for safetynet patients.

The two projects chosen involve groups of community health centers that will buy and distribute medications to their patients at reduced costs. In Minnesota, three health centers formed the Neighborhood Pharmaceutical Care Network. The Network is a drug purchasing and distribution system that will provide less expensive medications to the centers' more than 13,000 uninsured patients. In Georgia, a local safety net hospital and two health centers formed the Columbus Regional Community Healthcare Network, a similar system to Minnesota's network.

This HHS initiative began in 2001 and is open to organizations that are eligible for the 340B Drug Pricing Program. For more information about the demonstration projects including eligibility criteria, please visit http://www.hrsa.gov/odpp/new.htm.

Oral Health Grant Initiative

Deadline: June 21, 2002

The Center for Health Care Strategies (CHCS) recently announced a new funding opportunity for states that are working to improve access to oral health services for underserved populations. State Action for Oral Health Access is a \$6 million competitive grant program sponsored by the Robert Wood Johnson Foundation.

The program is designed to test statewide comprehensive approaches to improving oral care access for low-income, minority, and disabled populations. Grants of up to \$1 million each will be available for five to seven selected states.

A conference call for prospective grantees will be conducted May 16, 2002. Applications are due by June 21, 2002. For more information, visit http://www.chcs.org/grantinfo/applyoralhealth.html

HIV/AIDS Prevention Grants Available

Deadline: June 3, 2002

The United States Conference of Mayors (USCM), in cooperation with the CDC's National Center for HIV, STD, and TB Prevention, is accepting applications for its HIV/AIDS Prevention Grants Program. The program is designed to enhance local capacity for HIV/AIDS prevention activities by funding projects involving community-based organizations, local health departments or other local entities.

Proposals are being accepted under two categories. Projects under the first category must address the implementation of HIV/AIDS prevention services targeting Native Americans. The second category of projects must address the implementation of HIV/AIDS prevention services targeting gay or bisexual men of color. Approximately \$420,000 will be awarded, including three grants totaling \$165,000 for programs targeting Native Americans; and four grants totaling \$255,000 for programs targeting gay or bisexual men of color.

The application deadline is June 3, 2002. For the complete Request for Proposal, please visit http://www.usmayors.org/hivprevention/hiv_prevention grant.htm.

Grants Available to Assess HDCs

Deadline: Letter of Intent, May 15; Applications, June 12, 2002

The Agency for Healthcare Research and Quality (AHRQ), in partnership with the Bureau of Primary Health Care (BPHC) of the Health Resources and Services Administration (HRSA), is accepting applications for cooperative agreement research projects that will assess the HRSA-sponsored Health Disparities Collaboratives (HDCs). HDCs were initiated in 1998 to enhance the quality of care provided through BPHC's health centers and ultimately to improve the outcomes of underserved people. HDCs focus on diabetes, asthma, depression, and cardiac disease. They seek to narrow the gap between knowledge and practice in these health areas.

Approximately \$800,000 will be made available in FY 2002 to fund one to three projects to assess HDCs' effects on the processes and outcomes of care provided at the health centers, as well as on the health centers themselves. Applicants may request project periods of up to

three years and budgets for total costs of up to \$800,000. For more information, visit http://grants.nih.gov/grants/guide/rfa-files/RFA-HS-02-005.html.

Funding for Integrated State Women's Health Available

Deadline: Letters of Intent, May 10; Applications, June 17, 2002

HRSA's Maternal and Child Health Bureau (MCHB) recently announced funding to support states for "Integrated Comprehensive Women's Health Services in State MCH Programs." The program is intended to improve coordination of women's health services at the state level by developing partnerships among community-based organizations, academic institutions, and government agencies. Approximately \$600,000 has been made available for up to six three-year grants. Letters of intent are due by May 10, 2002 and applications are due by June 17, 2002. For additional information, please contact Lisa King at lking@hrsa.gov or 301-443-9739.

Grant Opportunity from HRSA's HIV/AIDS Bureau

Deadline: June 12, 2002

The HIV/AIDS Bureau of the Health Resources and Services Administration (HRSA) is seeking proposals for special projects evaluating the impact of information technology (IT) on improving the delivery and quality of care for HIV Seropositive Individuals. According to the Bureau, this solicitation "seeks proposals that will assess the extent to which IT applied in various HIV care settings can contribute to measurable and sustainable improvements in the delivery, quality or cost-effectiveness of care for people living with HIV (PLWH). Research findings should also help inform clinicians, researchers, payers, and policymakers on existing barriers to the use of IT in caring for HIV-infected patients and ways to overcome these barriers and implement successful IT solutions." Telemedicine initiatives will not be eligible for these grants.

There are three areas of emphasis:

- 1. Optimizing the delivery of health care;
- 2. Optimizing outcomes and quality of health care; and
- 3. Assessing the cost-effectiveness of IT interventions.

Three to four grants will be awarded to eligible organizations. For detailed information, including an application kit, please visit http://hab.hrsa.gov/grants/itguidancefinal.htm.

Funds Available for Depression Research Projects

Deadline: Letters of Intent, June 3, 2002

Depression in Primary Care: Linking Clinical and System Strategies is a five-year, \$12 million national program funded by the Robert Wood Johnson Foundation. The program is designed to increase use of effective models for treating depression in primary care settings. Proposals are currently being sought for research projects that will answer the question, "What is the real

value of providing quality care for depression in primary care settings, and how can that value best be achieved and documented?" These research projects should advance development of combined clinical and economic approaches to understand and overcome existing barriers at health plan, purchaser, provider, and patient levels.

Up to \$5 million has been made available for these grants. Small grants of less than \$100,000 will be awarded to projects to be completed within 12 months, and larger grants of \$100,000 to \$300,000 will be awarded to projects requiring 12 to 20 months to complete. Further information and application forms are available at http://www.depressioninprimarycare.org/.



CONFERENCES, PROGRAMS, AND OTHER NEWS

8th Annual Community Care **Networking Conference**

The 8th Annual Community Care Networking Conference will take place October 17-19, 2002 at the Hotel Inter-Continental Chicago. "Celebrating Progress: Promoting a New Era in *Health*" will celebrate the past, present, and future of community health improvement. Community Care Network (CCN) partnerships and other leading health experts will highlight critical lessons from the past seven years. The registration fee for the conference will be \$395 until September 10. For more information, please call 312-422-2640 or visit http://www.aha.org/hret.

Cultural Competence Training Conference

The American Public Human Services Association and the Managed Care Technical Assistance Center are sponsoring a one-day national conference on May 30, 2002 at the Drake Hotel in Chicago, Illinois. The conference will address developing cultural and linguistic competence in the Medicaid managed care environment. Experts will discuss fundamental elements of successful culturallyand linguistically-appropriate organizations and services, along with real-world strategies and tools participants can implement. For more information, please visit http://www.jsi.com/ hrsamctac/CulturalCompetency/CCAPHSABroc hure.pdf or call 877-832-8635.

Upcoming Summit from the Office of Minority Health

The Office of Minority Health (OMH) of the U.S. Department of Health and Human Services is sponsoring the first National Leadership Summit to Eliminate Racial and Ethnic Disparities in Health. The summit will take place on July 10-12, 2002 in Washington, D.C. The intent of the summit is to draw national attention to health disparities and the innovative approaches being used to overcome them. For more information, please visit http://www.summit.omhrc.gov.

Service-Learning Institute for Health **Professions**

Community-Campus Partnerships for Health (CCPH) is holding its 6th annual Introductory Service-Learning Institute from June 15-18, 2002 in the Cascade Mountains of Washington State. Service-learning is an educational methodology that combines student community service with explicit learning objectives. The theme of this session is "Advancing Educational Innovations for Improved Student Learning and Community Health."

The Institute is designed for faculty, staff, and community partners who are new to servicelearning or have only recently become involved in service-learning. Participants will work with mentors and colleagues from across the United States.

Applications for the Institute are due by May 15, 2002. Visit CCPH's website at http://future health.ucsf.edu/ccph/projects.html#fsli for

more information. Interested parties may also contact Piper Krauel, CCPH Program Director, at piperk@itsa.ucsf.edu or 415-502-7933.

REPORTS AND ISSUE BRIEFS

Handbook for Community Partnerships

The American Hospital Association (AHA) is offering a new handbook, "The Community Care Notebook: A Practical Guide to Health Partnerships," for community organizations looking to improve their current programs and partnerships. The handbook provides practical advice on topics such as creating bylaws, serving immigrant populations, tracking progress, and managing conflict. It can be ordered by calling 1-800-242-2626 and requesting catalog number 038101, or online at http://www.ahaonlinestore.com.

New Study Shows No Improvement in Health Care Access

The Center for Studying Health Systems Change (HSC) recently released a new report that demonstrates a lack of improvement in health care access over recent years, despite the presence of a strong economy, low unemployment rates, and less uninsured people. "Treading Water: Americans' Access to Needed Medical Care, 1997-2001," examines trends in Americans' ability to access health care, gaps between the insured and uninsured communities, cost issues, insurance problems, and children's access to care. According to the study, the most frequently cited barrier to care was cost. More than 90 percent of uninsured respondents cited cost as their main barrier, and more than half of insured respondents said cost prevented them from receiving required care. The study examines several existing barriers to care among American citizens. To read the entire study, please visit

http://www.hschange.com/CONTENT/421/.

IOM Releases Report on Unequal Treatment

The National Academies' Institute of Medicine (IOM) recently released a new report entitled "Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care" that examines disparities in health care service quality between white and minority Americans. Researchers focused specifically on diseases with the largest disparities, cardiovascular diseases, HIV/AIDS, cancer, and diabetes, and suggest explanations for the higher mortality rates that exist among minority Americans.

The study found that minority Americans tend to receive lower quality health care than do white Americans, regardless of insurance status, income, age, or severity of illness. While it is believed that several factors contribute to existing disparities, the study identified bias, prejudice, and stereotyping by providers as contributing factors. For the full report, visit http://www4.nationalacademies.org/onpi/webext ra.nsf/web/minority?OpenDocument.

NGA Report on Improving Medicaid

The National Governor's Association (NGA) recently released "Making Medicaid Better," a report detailing specific strategies states can use to improve Medicaid services. While many states are committed to Medicaid, it is becoming increasingly difficult to support program costs. The report outlines several suggested changes for improving Medicaid in 2002.

The complete report is available at http://www.nga.org/center/divisions/1,1188,C_I SSUE_BRIEF^D_3490,00.html

WEB RESOURCES

Mental Health Report Now Available Online

The recently released "Bright Futures in Practice: Mental Health" is now available on the Bright Futures Web site. This publication is a two-volume set that examines the mental health of children in a developmental context. It provides information on early recognition and intervention for specific mental health problems and mental disorders. The publication provides a tool kit for health professionals and families for more effective screening, care management, and health education and offers information on healthy emotional, behavioral, and cognitive development.

These guidelines were developed through funding from the Health Resources and Services Administration's Maternal and Child Health Bureau. "Bright Futures in Practice: Mental Health" is part of the Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents series.

The guide is available online at http://www.brightfutures.org/mentalhealth/pdf/index.html. The tool kit is available at http://www.brightfutures.org/mentalhealth/pdf/t ools.html.

HIPAA Model Compliance Plan Can Now Be Submitted Online

The Administrative Simplification Compliance Act allows covered entities to request a one year extension to the HIPAA compliance deadline of October 16, 2002 by submitting a compliance plan to the Department of HHS. To address this issue, The Centers for Medicare and Medicaid Services (CMS) has now developed a HIPAA model plan that can be submitted electronically. Any organization that submits the plan electronically will receive a confirmation number as proof of submission. For more information about this option, please visit http://www.cms.gov/hipaa/hipaa2/ASCAForm. asp.